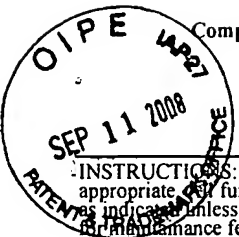


PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to : **Mail** Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 or **Fax** (571) 273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. Further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

24041 7590 06/12/2008
 SIMPSON & SIMPSON, PLLC
 5555 MAIN STREET
 WILLIAMSVILLE, NY 14221-5406

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Chester Paul Maliszewski	(Depositor's name)
/Chester Paul Maliszewski/	(Signature)
Sep. 9, 2008	(Date)

09/12/2008 RMEBRAH1 00000008 10711848

01 FC:1501 1440.00 OP
 02 FC:1504 300.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10711,848	October 08, 2004	Klaus KUPPER	LUKP:125US	5847

TITLE OF INVENTION:

GEARBOX ACTUATION SYSTEM AND METHOD FOR ADJUSTING A GEARBOX ACTUATION SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$1740	09/12/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
HO, HA DINH	3681	074-335000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Simpson & Simpson, PLLC

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

LuK Lamellen und Kupplungsbau Beteiligungs
 KG

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Buehl, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent):

☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

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☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature /Chester Paul Maliszewski/

Date Sep. 9, 2008

Typed or printed name Chester Paul Maliszewski

Registration No. 51,990

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Transmittal of Payment of Issue Fee

Docket Number

LUKP:125US

In Re Application Of: KUPPER et al.

Application No. 10/711,848

Filing Date October 08, 2004

Examiner HO, HA DINH

Art Unit 3681

Title of Invention

GEARBOX ACTUATION SYSTEM AND METHOD FOR ADJUSTING A GEARBOX ACTUATION SYSTEM

COMMISSIONER FOR PATENTS:

Transmitted herewith are the following for the above-identified application.

☒ Issue Fee Transmittal Form PTOL-85☒ Utility Fee☐ Design Fee☐ Plant Fee☒ Publication Fee

Fees Calculated below:

Fee Calculation

Issue Fee (from above) \$1440

Publication Fee (from above) \$300

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL \$1740

Method of Payment

☐ Deposit Account ☐ Credit Card ☒ Check ☐ Money Order ☐ Other: _____

Deposit Account Number _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge the fee(s) set forth above☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☐ Charge fee(s) indicated above, except for the filing fee☒ Credit any overpayments**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on form PTO-2038.**

Amount Grand Total \$1740

Transmittal of Payment of Issue Fee

Docket Number

LUKP:125US

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Sep. 9, 2008

(Date of Mailing)

Chester Paul Maliszewski

(Name of Person Mailing Correspondence)

/Chester Paul Maliszewski/

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Signature Instructions

Select the name of the person who will electronically sign the Transmittal of Payment from the drop-down box below.

If a practitioner is not present in the drop-down list, you must close this form and select 'Add Practitioner...' in the Form Manager's Utility menu.

Verify that the signatory information is correct and press the 'eSign' button to electronically sign the submission. If you prefer to sign the form manually, simply do not click the 'eSign' button; just print and manually sign.

Signatory Drop-Down Box

Maliszewski, Chester Paul

Name

Chester Paul Maliszewski

Registration Number

51,990

Signatory Capacity

Agent for Applicant(s)

E-mail Address

eSign

/Chester Paul Maliszewski/

Date Signed

09/09/2008